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Transurethral Resection of the Prostate (TURP)

Post-Operative Care Instructions for Patients

THE FIRST WEEK

- Rest, but **walk several times a day** starting the day of surgery — this prevents blood clots and pneumonia.
- **Drink 8 to 10 glasses of water daily.** This is the single most important thing you can do; it flushes the bladder and prevents clots.
- Avoid caffeine, alcohol, and spicy food for a few weeks — all irritate the healing bladder.
- Avoid constipation and straining. Use a stool softener; straining causes bleeding.

CATHETER CARE (IF YOU GO HOME WITH ONE)

- Keep the drainage bag **below the level of your bladder** at all times.
- Wash around the catheter with soap and water daily.
- Secure the catheter to your leg to prevent tugging.
- Empty the bag when about two-thirds full.
- Some blood and sediment in the bag is normal.

Catheter removal appointment: _____

MEDICATIONS

- Acetaminophen (Tylenol) is usually enough. Use any prescribed pain medication sparingly.
- **Finish the entire antibiotic course** if one was prescribed.
- Take a stool softener daily while on pain medication.
- **Resume blood thinners only when your surgeon tells you to** — usually about a week.
- Your BPH medications (tamsulosin, finasteride) are usually stopped — confirm with your surgeon.

ACTIVITY

- **No heavy lifting over 10 pounds for 4 to 6 weeks.**
- No strenuous exercise, running, or cycling for 4 to 6 weeks.
- No driving while taking narcotic pain medication.
- Desk work in 1 to 2 weeks; physical work 4 to 6 weeks.
- **No sexual activity for 4 to 6 weeks.**

WHAT IS NORMAL — AND THE PATTERN TO EXPECT

- Blood in the urine that comes and goes for **up to 6 weeks**. It often looks worse than it is.
- **A bleeding episode around days 7 to 14** as scabs separate. Increase your fluids and rest; it usually settles.
- Passing tissue fragments and scabs for several weeks
- Burning, urgency, and frequency for several weeks, improving gradually

- Some leakage or difficulty holding urine initially
- **Little or no visible semen at ejaculation** — this is expected and usually permanent

YOUR PATHOLOGY RESULTS

Removed tissue is examined under a microscope. Results take about a week and will be reviewed at your follow-up visit. Occasionally unsuspected prostate cancer is found, which is why this examination is done.

Follow-up appointment: _____

CALL THE OFFICE RIGHT AWAY IF YOU HAVE

Call 909.236.3333

- **Inability to urinate after the catheter is removed** — this needs prompt attention
- Heavy bleeding, thick clots, or urine the color of tomato juice that does not clear with increased fluids
- Fever over 101°F or shaking chills
- Severe lower abdominal pain or bladder distension
- A catheter that stops draining
- Calf pain, swelling, chest pain, or shortness of breath — **go to the emergency room for these**
- Nausea and vomiting preventing fluid intake

If you have severe symptoms or an emergency, go to the nearest emergency room.